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JUL 1998

COMMANDANT NOTICE 6230

CANCELED: JUL 6 1998

Subj: INFLUENZA IMMUNIZATION PROGRAM, 1997-1998

Ref: (a) COMDTINST 6230.4D Immunizations and Chemoprophylaxis

1. PURPOSE. This Notice provides current information on influenza vaccine composition for the 1997-1998 influenza season; prescribes immunization requirements for Coast Guard personnel; describes recommendations for nonmilitary patients; and provides guidance for compliance with a contractual requirement imposed by the vaccine manufacturer to inform nonmilitary patients of the risks and benefits of receiving influenza vaccine.
2. ACTION. Area and district commanders, commanders of maintenance and logistics commands, commanding officers of headquarters units, assistant commandants for directorates, Chief Counsel, and special staff offices at Headquarters shall ensure compliance with the provisions of this Notice.
3. BACKGROUND.
 - a. Influenza viruses have continued to cause major epidemics of respiratory disease. Typical influenza illness is characterized by abrupt onset of fever, sore throat, nonproductive cough and, unlike many other common respiratory infections, can cause extreme malaise lasting several days. Because of these attributes, influenza can compromise the Coast Guard's operational readiness. Influenza immunization will reduce the incidence of influenza, along with associated work absences and treatment costs.

DISTRIBUTION – SDL No.135

	a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z
A	2	2	2		2	2	2	2	2	2		2	2	1	1	1	1	1	1		1	1				
B		8	20	2	12	5		8	2	2	2	6	3	1	3	6	2	1	3	1	1	1	1	1	1	1
C	3	3	1	3	2	1		1	1	1	4	1	1		1	1	1	1		1	1	1	1	1	1	1
D	1	1	1	3	3	1	1	1	1	1	1	1	1	1	1	1	1	1		1	1	1	1	1	1	1
E	1						1	1		1	1	1		1	1											
F	3	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1						
G	1	1																								
H																										

NON-STANDARD DISTRIBUTION: B:c MLCs (6 extra)

JUL 7 1997

- b. Health services personnel can transmit influenza infections to high-risk patients while they themselves are incubating infection, undergoing subclinical infection, or working despite the existence of mild symptoms. Therefore, military health services personnel must receive the influenza vaccination.
- c. The Armed Forces Epidemiology Board and the Public Health Service review influenza vaccine formulation regularly. Reformulation of vaccine is recommended, as needed, to counter major antigenic changes and drift. The formulation of the 1997-1998 vaccine for military personnel is identical to that recommended for civilians.
- d. The formulation of the polyvalent influenza vaccine for 1997-1998 consists of A/Bayern/7/95, A/Wuban/395/95 and B/Harbin/7/94 viruses. The vaccine should contain 15 micrograms of each of the three components per adult dose (0.5 ml). Whole or split vaccines should be used depending on contractual arrangements and supplies from manufacturers.

4. DISCUSSION.

- a. Influenza immunization shall be conducted in accordance with reference (a) and the requirements of this notice.
- b. Influenza immunization is MANDATORY for all military health services personnel, officer candidates, recruits, cadets, personnel attached to combat or combat support units (WHEC, WMEC, WPB, WAGB, WLB, CGAS), national strike force, members of the Coast Guard Reserve designated by the district commander, individuals or special teams which are available for immediate deployment outside of the United States, and any or all members of a unit whose commanding officer chooses to protect from influenza to preserve operational effectiveness. Vaccine effectiveness is dependent in part upon administration prior to anticipated exposure to the influenza virus. Influenza outbreaks typically start in early fall with most cases appearing by mid-winter. To maximize the effectiveness of the vaccination, immunizations should be completed by 15 November 1997.
- c. All other beneficiaries desiring influenza immunization shall be immunized upon their request, provided the resources and facilities to perform immunizations exist. Use SF-522, Request For Administration Of Anesthesia And For Performance Of Operations And Other Procedures, to record the patient's authorization to perform this procedure.
- d. A contractual requirement imposed by the vaccine manufacturer requires that each nonmilitary patient be individually informed of the risks and benefits of receiving influenza vaccine. Provide a copy of enclosure (1) to each nonmilitary patient prior to their receiving the influenza vaccine.

JUL 7 1997

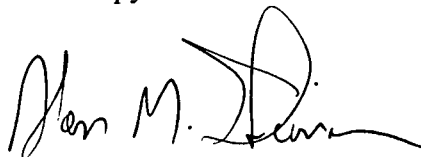
e. Influenza vaccine can be ordered from the Defense Personnel Support Center (DPSC) as described below.

- (1) NSN 6505-01-437-3600, Influenza Virus Vaccine, USP, whole/split virus, 50-dose vial, \$112.38 per vial. This product is intended for use with autoinjectors ONLY. This vaccine is primarily for immunizing military personnel.
- (2) NSN 6505-01-437-3955, Influenza Virus Vaccine, USP, Trivalent, whole/split virus, 10-dose vial, \$23.64 per vial, for administration by needle and syringe ONLY. This vaccine is for immunizing military personnel and eligible beneficiaries 13 years of age and older.
- (3) NSN 6505-01-437-3950, Influenza Virus Vaccine, USP, Trivalent, split virus, 10-dose vial, \$23.64 per vial, for administration by needle and syringe ONLY. This vaccine is for immunizing persons 6 months through 12 years of age.

Unit of issue for all items is vial (VI). These items will have a 12 month shelf life and expire on 30 September 1998. Product delivery will begin in early October.

5. RESPONSIBILITIES. Units with health care facilities shall ensure that:

- a. an influenza immunization program is carried out for active duty military personnel and those Reservists designated by the district commanders required by paragraph 4.b;
- b. an influenza immunization program is made available to all other beneficiaries subject to availability; and
- c. all nonmilitary patients are provided a copy of enclosure (1).



ALAN M. STEINMAN
Director of Health and Safety

Encl: (1) Important Information About Influenza and Influenza Vaccine

IMPORTANT INFORMATION ABOUT INFLUENZA AND INFLUENZA VACCINE

1. What Is Influenza ("FLU")? Influenza (or "flu") is a viral infection of the bronchial tubes and lungs that can affect anyone. Usually the flu occurs in the United States from November to April. If you get the flu, you may have fever, chills, cough, and soreness and body aches. Although most people are ill for only a few days, some have a much more serious illness and may need to go to the hospital. Thousands of people die each year in the United States from the flu or related complications.
2. Who Should Get Influenza Vaccine?
 - a. Because influenza is usually mild and most people recover fully, health officials emphasize the use of vaccine for the elderly and those with other health problems most likely to be seriously ill or to die from the flu or its complications. For example, people who after even light exercise become short of breath due to diseases affecting their heart or lungs, and people who have low resistance to infections, are likely to be more seriously affected by the flu. Groups that are at risk for serious illness with the flu and are recommended to receive vaccine:
 - (1) Adults and children with long-term heart or lung problems which caused them to regularly see a physician or be admitted to a hospital for care during the past year; and
 - (2) residents of nursing homes and other institutions housing patients of any age who have serious long-term health problems.
 - b. Other members of the public who are at moderately increased risk for serious illness with the flu and who public health authorities feel should be vaccinated if possible are:
 - (1) healthy people over 65 years of age;
 - (2) people of any age who have been seeing a physician regularly during the past year, or have been admitted to a hospital for treatment of kidney disease, cystic fibrosis, diabetes, anemia ("low blood"), or severe asthma; and
 - (3) people who have a type of cancer or immunological disorder (or use certain types of medicines) that lowers the body's normal resistance to infections.
 - c. Medical personnel who provide care for high risk patients also should be vaccinated to reduce the possibility of these patients catching the flu while receiving medical care.
3. INFLUENZA VACCINE. The viruses that cause flu frequently change, so people who have

been infected or given a flu shot in previous years may become infected with a new strain. Persons in the high-risk groups listed above should be vaccinated every year. This year's flu shot contains the strains A/Bayern/7/95, A/Wuhan/395/95, and B/Harbin/7/94 viruses to provide immunity against the types of flu which have been circulating in the past year and are thought to be most likely to occur in the United States next winter. The viruses in the vaccine are killed and cannot infect anyone. The vaccine will begin to provide its protection after about 2 weeks, and immunity decreases after several months. Flu shots will not protect everyone. They also will not protect against other illnesses that resemble the flu.

4. **DOSAGE.** Only a single flu shot is needed each season for those over 12 years, but children 12 and under may need a second shot after a month. The physician or nurse giving the flu shot will discuss this with parents or guardians. Children should be given only vaccine that has been treated during manufacture ("split virus") to reduce chances of side effects.
5. **POSSIBLE SIDE EFFECTS FROM THE VACCINE.** Most people have no side effects from influenza vaccine. Flu shots are injected, usually into a muscle of the upper arm. This may cause soreness for 1 - 2 days at the injection site and may also cause a fever or achiness for 1 - 2 days. As is the case with most drugs or vaccines, there is a possibility that allergic or more serious reactions or even death, could occur with the flu shot.
6. **WARNING - SOME PEOPLE SHOULD CHECK WITH A PHYSICIAN BEFORE TAKING THE INFLUENZA VACCINE.**
 - a. Persons who should not be given the flu shot include those with an allergy to eggs that causes dangerous reactions if they eat eggs.
 - b. Anyone who has ever been paralyzed with Guillain Barre Syndrome, as well as women who might be or are pregnant.
 - c. Persons who are ill and have a fever should delay vaccination.
 - d. Persons with any compromise of immunity (i.e., leukemia, chemotherapy, HIV, etc.).
7. **QUESTIONS.** If you have any questions about influenza or the influenza vaccination, please ask now or call your physician before requesting the vaccine.
8. **REACTIONS.** If anyone receiving influenza vaccine gets sick and visits a physician, hospital, or clinic in the 4 weeks after vaccination, please report this to:

Unit Administering Vaccine